

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Financial Planning Association Political Action Committee

ADDRESS (number and street) ▼

1901 Pennsylvania Avenue, NW

Suite 303

☐ Check if different than previously reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00370130

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Dan Barry

Signature of Treasurer

Mr. Dan Barry

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Financial Planning Association Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 01 2012 To: M M / D D / Y Y Y Y Y Y  
09 30 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">135715.25</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">118775.25</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">8790.00</span>	<span style="border: 1px solid black; padding: 2px;">13500.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">127565.25</span>	<span style="border: 1px solid black; padding: 2px;">149215.25</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">13000.00</span>	<span style="border: 1px solid black; padding: 2px;">34650.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">114565.25</span>	<span style="border: 1px solid black; padding: 2px;">114565.25</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Financial Planning Association Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2012

To:

M M / D D / Y Y Y Y Y  
09 30 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4625.00

5000.00

(ii) Unitemized .....

3165.00

7500.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7790.00

12500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

7790.00

12500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

1000.00

1000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

8790.00

13500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

8790.00

13500.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	34650.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13000.00	34650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13000.00	34650.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7790.00	12500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7790.00	12500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mr. Dwight A. Mikulis**

Mailing Address Suite 100

6345 Woodside Ct

City

Columbia

State

MD

Zip Code

21046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pinacle Advisory Group

Occupation

Financial Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2012

**Transaction ID : 20425867**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Stephen D. Johnson**

Mailing Address 12 Ashdown Pl

City

Half Moon Bay

State

CA

Zip Code

94019-2275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JohnsonMarotta

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : 20426424**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Thom R. Allison**

Mailing Address 1380 112th Ave NE

Ste 306

City

Bellevue

State

WA

Zip Code

98004-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allison Spielman Advisors

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : 20426427**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mr. Nicholas A. Nicolette**

Mailing Address 21 Chubby Lane

City State Zip Code  
 Montague NJ 07827-3159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Sterling Financial Group

Occupation  
 Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : 20426438**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Ms. Pamela S. Sandy**

Mailing Address 600 Superior Ave E  
 Suite 1300

City State Zip Code  
 Cleveland OH 44114-2654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Confiance, LLC

Occupation  
 Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : 20426439**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Mr. V. Raymond Ferrara**

Mailing Address 3 Seaside Lane  
 #102

City State Zip Code  
 Belleair FL 33756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Provise Management Group, LLC

Occupation  
 President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 22 2012

**Transaction ID : 20426584**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Planning Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mr. Richard C. Salmen**

Mailing Address 19930 W 117th Terr

City

Olathe

State

KS

Zip Code

66061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GTrust

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2012

Transaction ID : 20426590

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

4625.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 12  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Snowe For Senate**

Mailing Address PO Box 2012

City State Zip Code  
 Portland ME 04104

FEC ID number of contributing  
federal political committee.

**C** C00291955

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 23 2012

**Transaction ID : 20429931**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott Garrett For Congress**

Mailing Address P.O. Box 905

City Newton	State NJ	Zip Code 07860
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Purpose of Disbursement

011

Candidate Name

**Rep. Scott Garrett**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2012

**Transaction ID : 20429875**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Neugebauer Congressional Committee**

Mailing Address PO Box 54175

City Lubbock	State TX	Zip Code 79453
-----------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

**Rep. Randy Neugebauer**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2012

**Transaction ID : 20429876**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends Of Nan Hayworth**

Mailing Address P. O. Box 188

City Carmel	State NY	Zip Code 10512
----------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

**Rep. Nan Hayworth**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20429877**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Schweikert For Congress**

Mailing Address 8776 E Shea Blvd, Suite B3a-626

City	State	Zip Code
Scottsdale	AZ	85260

Purpose of Disbursement

011

Candidate Name

**Rep. David Schweikert**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2012

**Transaction ID : 20429880**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Dave Camp For Congress**Mailing Address 5915 Eastman Avenue  
Suite 100

City	State	Zip Code
Midland	MI	48640

Purpose of Disbursement

011

Candidate Name

**Rep. David Camp**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2012

**Transaction ID : 20429888**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Vern Buchanan For Congress**

Mailing Address P. O. Box 48928

City	State	Zip Code
Sarasota	FL	34230

Purpose of Disbursement

011

Candidate Name

**Rep. Vern Buchanan**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2012

**Transaction ID : 20429889**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Financial Planning Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends Of Jeb Hensarling**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2012

Mailing Address PO Box 820504

City	State	Zip Code
Dallas	TX	75382

**Transaction ID : 20429897**

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

**Rep. Jeb Hensarling**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 05

2500.00
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Full Name (Last, First, Middle Initial)

**B. Blaine For Congress 2012**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2012

Mailing Address PO Box 125

City	State	Zip Code
Holts Summit	MO	65043

**Transaction ID : 20429900**

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

**Rep. Blaine Luetkemeyer**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MO District: 09

1000.00
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Full Name (Last, First, Middle Initial)

**C. Cantor For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2012

Mailing Address P. O. Box 17813

City	State	Zip Code
Richmond	VA	23226

**Transaction ID : 20429905**

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

**Rep. Eric Cantor**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: VA District: 07

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

13000.00